

The Commonwealth of Massachusetts **Division of Professional Licensure**

239 Causeway Street Boston, MA 02114 www.state.ma.us/reg/boards/hi Board of Registration of Home Inspectors (617) 727-4459

BOARD USE ONLY Ex. Date Ex. Result Cert. Date Cert. No					Application for Associate Home Inspector License								Associate Home Inspector Fee \$225 Attach certified CHECK or MONEY ORDER payable to the Commonwealth of MA. DO NOT SEND CASH													
Please Us	e Ink	or T	ype	- M	lust	Be	Ne	at A	nd	Leg	gibl	e							1				1			
Last Name											Jr	., Sr.	, III,	etc.		Fi	irst]	Nam	le le				M. I.			
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Associate Home Inspector Application Applicant's Name_____

1.	state/jurisdiction from which the lic	hold in the United States or any country cense/certification was originally issued. tion in which you are licensed/certified, y information.	Please attach a certificate of						
2.	Has a licensing/certification board located in the United States, any country or foreign jurisdiction, taken any disciplinary action against you? Yes No If yes, please state the details (use a separate sheet if necessary):								
3.	Are you the subject of pending disciplinary actions by a licensing/certification board located in the United States or any country or foreign jurisdiction? Yes No If yes, please state the details (use a separate sheet if necessary):								
4.	Have you ever voluntarily surrendered or resigned a professional license to a licensing/certification board in the United States or any country or foreign jurisdiction? Yes No If yes, please state the details (use a separate sheet if necessary):								
5.	Have you ever applied for and been denied a professional license in the United States or any country of foreign jurisdiction? Yes No if yes, please state the details (use a separate sheet if necessary):								
6.	jurisdiction, other than a traffic viol	felony or misdemeanor in the United Statation for which a fine of less than \$100.0 please state the details (use a separate shape)	00 was assessed?						
7.	application for licensure is truthful information may be grounds for the Inspectors in Massachusetts to susp	ties of perjury, that the information I have and accurate. I understand that the failure Division of Professional Licensure, Bostond or revoke a license issued to me in a to M.G.L.C.62C, s. 49A. to the best of near that the taxed required by law.	re to provide accurate and of Registration of Home accordance with Massachusetts						
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Associate and Permanent License Application

HOME INSPECTOR SUPERVISION VERIFICATION

Make copies and use more than one sheet if necessary. All signatures must be original. Pursuant to M.G.L 146 all statements made are subject to the penalties of perjury.

Name of Applicant			
Name of Employer		<u> </u>	
Employer's Address			
No. Street	City/Town	State	Zip
Employed To Month Day Year	Month Day Year	Years	
Signature of Licensed Home Inspector	MA License Number		Date



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Home Inspections List

Please list 25 home inspections performed under direct supervision of a Massachusetts Licensed Home Inspector.

Date	Address	Client
1.		
2.		
3.		
4.		
5.		
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